

DBHDS

DIVISION OF DEVELOPMENTAL SERVICES

COMMUNITY BULLETIN #9

SEPTEMBER 2013

This continues the series of communications from the Division of Developmental Services (DDS) aimed at keeping ID Waiver and Targeted Case Management providers (CSBs and private providers) informed regarding the new initiatives and in compliance with established requirements.

SERVICE AUTHORIZATION

Backlog

As a result of the new requirement for annual reauthorizations, the implementation of new slots effective 7/1/13 and the renewals of Respite services, which come due 7/1, DBHDS is experiencing a backlog of service authorization requests. DBHDS has agreed to the Department of Medical Assistance Services' (DMAS) request to perform an expedited review of all requests currently in the ID and DS Waiver queue. In addition, DBHDS is in the process of hiring additional temporary staff to assist in service authorization efforts. This should result in clearing the backlog of agency and consumer-directed service authorizations by no later than 10/11/13.

A new reason code, 1173, will be used on the expedited authorizations. The expedited authorizations will read "Approved. Post clinical review may warrant adjustments to this PA." DBHDS will not review for a "clinical justification" at this time in order to best ensure a continuation of services. If, upon later review, the clinical documentation does not support the authorization, DBHDS will request additional documentation by the provider. The provider must respond to this request in the time frame indicated by DBHDS. If the provider does not respond, DBHDS will base the final determination on the information that it has received and take the appropriate action.

Timely Submissions and Billing

In order to obtain desired start dates, particularly during times of high volume such as the June – July period and the month of December, it is ***strongly recommended*** that service authorization requests be submitted *at least 30 days in advance* of the desired start date.

A related issue is that some providers wait an inordinately long time before billing and do not discover service authorization problems until they bill. This makes issues more difficult to correct. Please bill promptly and regularly. Because there are several different codes for "approved" ISARs, providers should be sure to ***open*** all items in their return queue. "Approved" could mean that an item is approved with a modified start or end date from that which was requested. Only opening the item and examining it will reveal this.

Periodic Support Hours Requests

All providers requesting Periodic Supports that use the recommended “Determining Periodic Support Hours” form should be using the 2010 version available on the DBHDS website: <http://www.dbhds.virginia.gov/documents/forms/3055eMRWaiver.pdf> (for Residential, Personal Assistance or Skilled Nursing services) or <http://www.dbhds.virginia.gov/documents/forms/3061eMRWaiver.pdf> (for Day Support or Prevocational Services). It is not necessary to routinely append the “Determining Periodic Support Hours” form to the service authorization request in IDOLS; however, requests for high numbers of Periodic Support hours should be accompanied by a *thorough* explanation/justification in the “Notes” section of the ISAR in IDOLS.

Appeals vs. Reconsiderations

It is policy that service start dates may not be approved for a date earlier than the one on which the ISAR is received by DBHDS Preauthorization staff, except for Crisis Stabilization services. However, if there are serious, extenuating circumstances and an earlier date is required, it is a more efficient use of resources for the provider and/or Support Coordinator to request a reconsideration of the start date during the initial submission of the service authorization request than to file a formal appeal after the authorization has been processed. Page 25 of the *Navigating IDOLS* manual (for providers) states, “If there is a legitimate reason for an earlier date, the provider must state the reason in the “Comments/Justification” notes section and include the earlier date desired with the justification. The SC/CM must, in the approval process, indicate approval of this earlier requested date by placing a note in the same location or the notes section.” [See <http://www.dbhds.virginia.gov/ODS-UsefulInformation.htm#mr4>.]

Submitting Elements of the Individual Support Plan

It is not necessary to append Part V of the ISP to service authorization requests in IDOLS. However, as with requests for high numbers of Periodic Support hours, if there is something unusual about the request, a high number of overnight safety support hours, etc., it is advised that a justification of the individual’s need for supports (including age, relevant medical conditions, etc.) and plans for staff supports be included in the Notes section of the ISAR.

60-Day Assessment Requests

DBHDS PA staff will authorize all 60-day assessment ISARs for a full year. This is permissible for **Day Support, Prevocational, Supported Employment, Residential or Personal Assistance services**. Support Coordinators must ensure that a full annual plan has been developed, received by them, and is being implemented following the 60-day assessment period. Upon annual reauthorization, a regular ISAR (that includes justification for the service as always) must be submitted through IDOLS.

Update Medical/Psychological Exam Information

PA staff have noticed that a number of unnecessary pends are the result of Support Coordinators failing to enter/update individuals’ medical exam or psych exam dates in IDOLS (in the “Exam” section of the Waitlist Record). Since some individuals are

having their first IDOLS action now that annual renewals are required, these exam dates might not have been entered correctly or at all when IDOLS was initiated. Please check these dates, as well as ensure that the annual LOF date (which must be updated annually in the Waitlist Record section) is updated prior to submission to PA staff. This will cut down on the number of service authorization delays.

Your attention to these helpful hints will greatly expedite the service authorization process. Questions related to the service authorization process may be addressed to your Community Resource Consultant (<http://www.dbhds.virginia.gov/documents/ODS/omr-CR-ConsultantContactList.pdf>). Questions regarding a particular IDOLS submission should be addressed to your Preauthorization Consultant (<http://www.dbhds.virginia.gov/documents/ODS/ods-Contacts-PA-Assignments.pdf>).